

In re: Joanne C. Evarts

Bankruptcy No. 16-11056-BAH

Objection to Proof of Claim No. 2

Exhibit 12 - Proof of Continuous Home Owner's Insurance 12/7/2011
to Present



September 6th, 2018

To Whom It May Concern,

The attached documents show evidence of property insurance for the home at 18 Butternut Drive Cornish, NH 03745 owned by Jo Evarts from original term of 12/7/2011- 12/7/2012 with Vermont Mutual Insurance Company. As well you will see the policy declarations pages for the same homeowners policy in its current term of 12/7/2017-12/7/2018 that is currently in good standing and is active. Lastly you will see an email dated today 9/6/2018 from an underwriter at Vermont Mutual Insurance Company confirming continuous coverage. These documents show that the insured, Jo Evarts, has maintained an insurance policy with Vermont Mutual Insurance company from 12/7/2011 to this very day. Please let us know if you have any questions or need any additional information.

Take Care,

Kabray Rockwood



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

1/4/2012

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY Poulos Insurance Inc. PO Box 298 Woodstock VT 05091	PHONE (AG, No, Ex): (802) 457-1422	COMPANY Vermont Mutual Insurance Co. 89 State Street P.O. Box 188 Montpelier VT 05601
FAX (AG, No): (802) 457-1425	E-MAIL ADDRESS: info@poulosinsurance.com	
CODE: 44156	SUB CODE:	
AGENCY CUSTOMER ID #: 00071943	LOAN NUMBER	POLICY NUMBER HO17050628
INSURED JO EVARTS & JEREMIAH EVARTS 18 BUTTERNUT DR CORNISH NH 03745-4144	EFFECTIVE DATE 12/7/2011	EXPIRATION DATE 12/7/2012
		CONTINUED UNTIL TERMINATED IF CHECKED
	THIS REPLACES PRIOR EVIDENCE DATED:	

PROPERTY INFORMATION

LOCATION/DESCRIPTION
Loc# 0001
18 BUTTERNUT DR
CORNISH, NH 03745-4144

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
3, Special Form		
Dwelling, 04/1991	500,500	1,000
Other structures	50,050	
Personal property	350,350	
Loss of use	100,100	
Personal liability	500,000	
Medical payments	5,000	
Non smokers discount, HONSD		
Superior Home Discount, HOSPR		
Premises alarm, HO0416, 04/1991		

REMARKS (Including Special Conditions)

Annual Premium \$1214.00. Mortgagee billed.

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

NATION STAR MORTGAGE LLC PO BOX 7729 SPRINGFIELD, OH 45501-7729	<input checked="" type="checkbox"/> MORTGAGEE	ADDITIONAL INSURED
	<input type="checkbox"/> LOSS PAYEE	
	LOAN #	
	AUTHORIZED REPRESENTATIVE Susan Spaulding/SAS <i>Susan A. Spaulding</i>	

ACORD 27 (2009/12)

IN8027 (200912).02

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Vermont Mutual Insurance Company
89 State Street, PO Box 188
Montpelier, VT 05602

To report a claim call your Agent
or the company at 800-435-0397

06/09/2018

Policy Number: HO17050628
POLICY CHANGE

DIRECT BILL TO MORTGAGEE
BSI FINANCIAL SERVICES

HOMEOWNERS POLICY - DECLARATIONS

The Declarations complete this policy and supersede any previous Declarations issued by this Company.

Named Insured / Mailing Address
JO EVARTS
18 BUTTERNUT DR
CORNISH, NH 03745-4144

Agency / Address
NFP PROPERTY & CASUALTY-WDSTK
SERVICES INC
PO BOX 298
WOODSTOCK, VT 05091-0298
(802) 457-3341

Policy Period

From: 12/07/2017 To: 12/07/2018 12:01 A.M. Standard Time at residence premises.

The residence premises covered by this policy is located at:

18 BUTTERNUT DR
CORNISH, NH 03745-4144

CHANGE EFFECTIVE: 06/01/2018

CHANGE RECEIVED FROM: MORTGAGEE

SUMMARY OF CHANGE:

AMENDED MORTGAGEE PER MORTGAGEE REQUEST

NO CHANGE IN PREMIUM

We will provide the insurance described in this policy in return for the premium and compliance with all applicable provisions.

COVERAGE	LIMIT OF		PREMIUM
SECTION I	LIABILITY		
A. Dwelling	\$635,000	Basic Policy Premium	\$1,844.00
B. Other Structures	\$63,500	Additional Premiums	\$143.00
C. Personal Property	\$444,500		
D. Loss of Use	\$127,000		
		Total Premium	\$1,987.00

SECTION II

E. Personal Liability-each occurrence \$500,000
F. Medical Payments to Others-each person \$5,000

DEDUCTIBLES

In case of a loss under Section I, we cover only that part of the loss over the
\$1,000 All Perils Deductible

SECTION II - OTHER INSURED LOCATIONS

MORTGAGEE
BSI FINANCIAL SERVICES
ISAOA/ATIMA
PO BOX 961260
FORT WORTH, TX 76161-0260

LOAN NUMBER: N/A

Date

Countersigned by Authorized Agent

Forms and endorsements made a part of this policy at time of issue are printed on the following page(s).

Insured

POLICY NUMBER
HO17050628

NAMED INSURED
JO EVARTS

FORMS AND ENDORSEMENTS MADE A PART OF THIS POLICY
AT TIME OF ISSUE

FORM	ED. DATE	DESCRIPTION	PREMIUM
HO0003	04/91	SPECIAL FORM	\$1,844
VH0128	05/08	SPECIAL PROVISIONS	NO CHARGE
HO0432	05/02	LTD. FUNGI, WET OR DRY ROT...	NO CHARGE
HO0446	04/91	INFLATION GUARD	INCLUDED
HO0496	04/91	HOME DAY CARE EXCLUSIONS	NO CHARGE
HO2491	01/08	WORKERS COMPENSATION	\$3
HOSCE	08/06	SEC I COV B - OTHER STRUCTURES	NO CHARGE
HO0416	04/91	2% PROTECTIVE DEVICE CREDIT	INCLUDED
HO0455	03/03	IDENTITY FRAUD EXPENSE COVERAG	\$25
HO0490	04/91	PERSONAL PROP REPLACEMENT COV	INCLUDED
HOHSB1	11/13	HOME SYSTEM PROTECTION COV	INCLUDED IN NHHCA
HOLFC		LOSS FREE CREDIT	INCLUDED
		3 YEARS LOSS FREE 6% DISCOUNT	
HOSPR		SUPERIOR HOME DISCOUNT	INCLUDED
NHHCA	07/14	HOMEOWNER COVERAGE ADVANTAGE	\$115
NP2881	01/15	NOTICE TO POLICYHOLDERS	
NP9949	11/14	USE OF CREDIT BASED INS SCORES	
NP9953	04/16	FAIR CREDIT REPORTING ACT	
PRNOTICE	06/01	PRIVACY NOTICE	

This page specifies the declarations for endorsements made a part of this policy at time of issue.
Any newly added forms are attached.

Insured

Fw: Jo Evarts HO17050628

Rockwood, Kabray

Thu 9/6/2018 11:05 AM

To: therockwoodagency2@hotmail.com <therockwoodagency2@hotmail.com>;

1 attachments (14 KB)

Attachment.pdf;

From: Michael Germano <MGermano@VermontMutual.com>

Sent: Thursday, September 6, 2018 11:01 AM

To: Rockwood, Kabray

Subject: Jo Evarts HO17050628

ATTENTION - EXTERNAL EMAIL - This email originated from the following external email address - mgermano@vermontmutual.com.

Good Morning,

Per our phone discussion – the above listed policy has had continuous coverage since issued on 12/07/2011. The policy was non-renewed in 2012, but reinstated with no lapse.

Mike Germano
Personal Lines Underwriter II
Vermont Mutual Insurance Group®

P: 800-451-5000 x 8317
E: mgermano@vermontmutual.com

PO Box 188 – 89 State Street
Montpelier, VT 05601-0188

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VERMONT MUTUAL INSURANCE COMPANY
89 State Street, P.O. Box 188
Montpelier, VT 05601-0188

NOTICE OF REINSTATEMENT

POLICY NUMBER: H01 7-05-06-28
POLICY TYPE: HOMEOWNERS

DATE: 12/19/2012

Mail To:
JO EVARTS
JEREMIAH EVARTS
18 BUTTERNUT DR
CORNISH, NH 03745-4144

Effective Date of
Reinstatement: 12/07/2012

We are pleased to notify you that the above mentioned policy is reinstated without interruption of coverage.

AGENT:
POULOS INSURANCE INC-WOODSTK
WOODSTOCK, VT 05091-0298

NOTICES TO:
NATION STAR MORTGAGE LLC

OTHER NAMED INSURED(S):